



Return to: David Huff
Traffic Education Programs
Office of Public Instruction
Linda McCulloch, Superintendent
PO Box 202501
Helena, MT 59620-2501
www.opi.mt.gov

Application for Approval
Traffic Education Program for Young Novice Drivers
For _____ - _____ School Year
Including _____ Summer Program

DUE: This is carbon sensitive paper. Type or print so all copies are legible. OPI approval must be received before the program begins. When completed, signed and dated, return white and yellow copies to OPI. Keep the pink.

ATTENTION: School districts must apply to the Superintendent of Public Instruction for approval of a Traffic Education Program for Student Drivers **before** the program begins in order to be eligible for state reimbursement (10.13.308 ARM).

District Superintendent's Name: _____
District Name: _____
School Name: _____
Mailing Address: _____
City: _____ ZIP: _____

- I. **TRAFFIC EDUCATION TEACHER:** The traffic education teacher must have approval as a traffic education teacher prior to the beginning date of the program in order for the district to be eligible for state reimbursement [10.13.308(3), 10.13.310, ARM].
Name(s) of teacher(s) to be used in the program: **(Please include their driver license number.)**

- II. **REQUIREMENTS:** School districts must provide programs that meet the requirements for an approved traffic education program set out in 10.13.307, 10.13.311-313, ARM, to be eligible for reimbursement.

PROGRAM

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Consists of at least sixty (60) hours of instruction, six (6) of which must be driving | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The program of instruction will extend over a period of not less than 25 days. | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. All students enrolled in the course will reach their 15th birthday within 6 months of course completion. | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Each student will possess a proper license or permit to legally operate a vehicle on Montana roadways. | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. All phases of the program will be taught concurrently. (Classroom and driving will be taught simultaneously.) | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. The district traffic education course is based on a current curriculum guide approved by the Office of Public Instruction. | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Students meet or exceed the identified objectives listed in OPI's current Traffic Education Curriculum Guide in order to be certified as successfully completing the program. | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. The program is scheduled so that a sufficient number of courses are provided to allow every eligible youth within the school jurisdiction an opportunity to enroll. | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Participates in the Cooperative Driver Testing Program (CDTP) for driver licensing purposes. | <input type="checkbox"/> | <input type="checkbox"/> |

VEHICLES

- | | | |
|--|--------------------------|--------------------------|
| 10. Do you own your traffic education vehicle(s)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. If you answered "no" to number 10, does the district use the "School/Dealer Vehicle Use Agreement," or its equivalent, when a loan vehicle is obtained via a vehicle dealer? | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. The vehicle will be: | <input type="checkbox"/> | <input type="checkbox"/> |
| properly licensed. | <input type="checkbox"/> | <input type="checkbox"/> |
| properly insured to provide adequate protection for all concerned. | <input type="checkbox"/> | <input type="checkbox"/> |
| used exclusively for traffic education. | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Vehicles will be equipped with a dual-control brake, two exterior mirrors, a first aid kit, flares or reflectors, a fire extinguisher, and an accident report form. | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. The vehicle will be properly identified from the rear of the vehicle with an appropriate sign. | <input type="checkbox"/> | <input type="checkbox"/> |

ORGANIZATION

15. Indicate the start and completion dates for each program you conduct: (must be scheduled over no less than 23 days beginning Sept. 1, 2003, no less than 25 days beginning Sept. 1, 2004)
- | | | | | | |
|---|------------------|------------------|---|------------------|------------------|
| <input type="checkbox"/> First semester: | Start date _____ | Compl date _____ | <input type="checkbox"/> First semester: | Start date _____ | Compl date _____ |
| <input type="checkbox"/> Second semester: | Start date _____ | Compl date _____ | <input type="checkbox"/> Second semester: | Start date _____ | Compl date _____ |
| <input type="checkbox"/> Summer: | Start date _____ | Compl date _____ | <input type="checkbox"/> Summer: | Start date _____ | Compl date _____ |
16. Indicate when the following will be taught:
- | | | | |
|-------------------|--|---------------------------------------|---------------------------------|
| Classroom: | <input type="checkbox"/> During school hours | <input type="checkbox"/> After school | <input type="checkbox"/> Summer |
| Behind-the-Wheel: | <input type="checkbox"/> During school hours | <input type="checkbox"/> After school | <input type="checkbox"/> Summer |
| Other: | <input type="checkbox"/> During school hours | <input type="checkbox"/> After school | <input type="checkbox"/> Summer |
17. Indicate the **number of hours** of instruction given each student for each of the following: (must total 60 hours, 6 of which must be BTW)
Classroom: _____ Observation: _____ Behind-the-Wheel (BTW): _____ Simulation: _____ Other: _____ **TOTAL HOURS:** _____
18. Indicate approximate 9th grade population: _____ 19. How many students do you expect to enroll over application period? _____

A district wishing approval to depart from any requirements must attach clear and complete explanations to this application.

III. **CERTIFICATION**

I certify that the school district Traffic Education Program for young novice drivers will be established and maintained in accordance with the current standards outlined by the Office of Public Instruction; rules 10.13.301-313, ARM; and Sections 20-7-501-507, MCA; and **that all eligible youth will have an opportunity to enroll.**

Signature, District Administrative Official

Date

Daytime Phone

OPI USE ONLY

- ☐ Approved as noted:
☐ Not approved as noted:

Signature, Director, Traffic Education Program

Date